## DT12 Rec'd PCT/PTO 1 7 MAR 2005

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: GIOVANNI

Middle Name::

Family Name:: DE TONI

Name Suffix::

City of Residence:: SESTO SAN GIOVANNI

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIALE G. MATTEOTTI, 191

Address::

City of Mailing Address:: SESTO SAN GIOVANNI

State or Province of Mailing Address::
Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20099

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: RENZO

Middle Name::

Family Name:: LISEI

Name Suffix::

City of Residence:: PADERNO DUGNANO

State or Province of

Residence::

Country of Residence::

Street of Mailing VIA BOLIVIA, 36

Address::

City of Mailing Address:: PADERNO DUGNANO

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address:: I-20037

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: MAURIZIO

Middle Name::

Family Name:: RIPAMONTI

Name Suffix::

City of Residence:: SERGATE

State or Province of

Residence::

Country of Residence:: NTALY

Street of Mailing VIA FRATELLI CERVI Address:: RES. TREFILI S.N.C.

City of Mailing Address:: SERGATE

State or Province of Mailing Address::
Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20090

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: ROBERTO

Middle Name::

Family Name:: SALGARI

Name Suffix::

City of Residence:: BASIGLIO

State or Province of

Residence::

Country of Residence:: ITALY
Street of Mailing VIA COLOMBO

Address::	1	RES. I	'IGLI,	212			
City of Mailing Address:: BASIGLIO							
State or Provinc	e of Mailing	g Addr	ess::				
Country of Maili	ng Address:	:	ITALY				
Postal or Zip Co	de of Mailir	ng Add	ress::	I-20080			
Correspondence I	nformation						
Correspondence Customer			00466				
Number::							
Representative I	nformation						
Representative Customer			00466				
Number::							
Domestic Priorit		on .	-				
Application:: Continui			Paren	Parent		Parent Filing	
	Type::			cation::		Date::	
This application	National St	age o	f PCT/I	T2002/000	594	9/17/02	
Foreign Priority							
Country::	Application		Filing Date:: Pr			iority	
	Number::		C1		Cla	aimed::	
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## Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::